

THE MEDICAL NEWS AND LIBRARY.

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TODD & BOWMAN'S PHYSIOLOGY,

TWENTY-FOUR PAGES.

MEDICAL PROGRESS.

Committee on Surgery of the American Medical Association.—The committee appointed to report at the next meeting of the American Medical Association, in Baltimore, in May next, upon the subject of all the important improvements in the management of surgical diseases effected in America during the year, request from practitioners throughout the country the necessary information on which to base their report. On the subjects of lithotomy and lithotrity—the treatment of aneurism of the larger arteries by compression—with the frequency with which stone and aneurisms of the external vessels are met with in different sections of the country, and the results of any class of operations, where done on a large scale,—the committee are particularly desirous of gaining information; any intelligence, however, relative to surgery, that may be deemed worthy of being communicated to the Association, is solicited.

Communications should be addressed by mail to the chairman of the committee, GEO. W. NORRIS, M. D., Philadelphia.

Delegates to the American Medical Association.—"At the semi-annual meeting of the Rhode Island Medical Society, the following gentlemen were appointed delegates to the next meeting of the American Medical Association, to be held in Baltimore in May, 1848:—Drs. Joseph Mauran, (President of the Society), David King, Usher Parsons, Ezekiel Fowler, Henry W. Rivers, Jabez Holmes."

Chester County Medical Society.—The Chester County Medical Society held a stated meeting at West-Chester, Dec. 1st, 1847. The following physicians were duly elected members:—Drs. Andrew Wills, D. D. Korig, Jno. P. Jefferis, H. Darlington, Jos. R. Hoskins, Wm. Davis, and Wm. H. Tingley.

The code of medical ethics agreed upon by the American Medical Association, was adopted by the Society.

The following preamble and resolutions were unanimously adopted:

Whereas, no State Medical Society exists in Pennsylvania, and believing that such an institution would greatly contribute to the

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advancement of medical knowledge within its bounds; therefore,

Resolved, That it is expedient to hold a convention at such time and place as may be hereafter agreed upon, in order to take this subject into consideration, and effect such a permanent organization as may be deemed best suited to accomplish the object in view.

Resolved, That Drs. W. Worthington, C. W. Parish, Jno. T. Huddleson, W. W. Townsend and S. H. Harry, be delegates to represent this society in said convention, with power to supply vacancies in their own body.

Resolved, That the corresponding secretary be directed to forward a copy of these proceedings to the different medical schools and associations in the commonwealth, and solicit their early co-operation.

Drs. W. Worthington, Jno. T. Huddleson, S. Harris, and S. H. Harry, were appointed delegates to the American Medical Association, which assembles in the city of Baltimore on the first Tuesday of May, 1848.

Drs. E. F. Rivinses, J. Hickman, J. R. Walker and J. Coates, were appointed their alternates.

WILNER WORTHINGTON, *Rec. Sec.*

State Medical Convention.—We understand that the Medical Society of the city and county of Lancaster, at a late meeting, following the example of the Chester County Medical Society, elected delegates to a State Medical Convention, for the purpose of forming a State Medical Society. This society proposes that the convention should assemble in Lancaster, on the second Tuesday (11th) of April next.

Professor Annan's Remarks on the National Medical Convention.—Prof. Annan's attack upon the National Medical Convention has been so completely rebutted by an able correspondent in our numbers for August and October last, that it is wholly unnecessary further to discuss the subject. But we may be permitted to refer to two well-written reviews of the Professor's pamphlet, one by Dr. SUTTON, of Georgetown, Ky., in the *Western Journal of Medicine and Surgery*, for November, and the other in the *Southern Journal of Medicine and Pharmacy*, for November, by one of the editors. If the Professor does not feel himself prostrated by the powerful arguments of the former, he will scarcely be proof, we sus-

pect, against the keenly pointed shafts of satire directed against him by the latter.

Buffalo Medical College.—Extension of Lecture Term.—The Faculty of this institution have resolved that the lecture session for 1848-9 shall commence on the last Wednesday in Nov., 1848, making, with the preliminary dissecting term of one month, a *six months course*, thus virtually, if not literally, adopting the recommendation of the National Medical Convention.

The coming Spring Course, commencing the last of February next, will continue, as announced in the circular and advertisements, for the usual period, viz., sixteen weeks.

We take great pleasure in making this announcement.

The Buffalo institution is, so far as we know, the fourth institution in the country to extend the lecture term, and the first to do so of the institutions north and west of N. York city.—*Buffalo Med. Journ.*, Jan., 1848.

MEDICAL NEWS.

DOMESTIC INTELLIGENCE.

Assimilated Rank of the Civil Branch of the Navy.—This is the title of a pamphlet of eight pages, placed on our table. We learn from it, as well as from other sources, that a systematic attempt is making by other officers, to induce Congress to deprive the medical officers, as well as other civilians of the navy, of the position or assimilated rank given them, about a year since, by the Secretary of the Navy. The author of the pamphlet before us endeavours to show, and successfully, we think, that, while assimilated rank,—position relatively to the officers of the line,—in a military community, is necessary to medical officers, it takes away no power, authority, perquisite or privilege from any, except that of inflicting petty insults on our professional brethren on occasions of ceremony, such as military funerals, processions, &c. It is believed the senseless opposition to the establishment of an assimilated rank is confined to a few young, or inconsiderate navy officers, and is by no means generally approved. Whether this be so or not, it is our duty to prevent, if possible, any legislation calculated to injure or press unfairly on any section of the profession. Medical officers of

our army and navy, although in number few, constitute a respectable portion of the great professional body, and if they be degraded in position relatively to their military associates, it is a reflection on the members of the profession generally. They are seldom brought together in numbers, being isolated by the nature of their employment, especially in the navy, and therefore have stronger claims for the sympathy and aid of their professional brothers, in every effort they may be required to make to secure a just position or compensation in the two arms of the military service of the country. The propriety of giving assistant surgeons an assimilated rank as lieutenants, and to surgeons an assimilated rank as commanders in the navy, which would simply place medical officers of the army and navy on the same level relatively to the line, seems scarcely to admit of a doubt.

As the matter has been agitated, Congress should settle the question by law, without going into the consideration of the very debatable point which has been made the issue, by the military officers, as the subject has been presented. The committee on naval officers has been directed to inquire into the legality of the general order, conferring assimilated rank, which, being resolved into its elements, raises the momentous question for decision by Congress—"the assembled and aggregate wisdom of the nation"—"Whether has the President of the United States, by the act of a member of his cabinet, transcended his constitutional power or not? Has the Secretary of the Navy power under the Constitution to issue an order which virtually, though not verbally, declares that hereafter no lieutenant shall have authority to order a surgeon to leave the ship by the larboard gangway, while he himself reaches his boat by the starboard route?"

Impeachment is covert in this move, and it may not be unwise in Congress to crush it, by at once enacting a proper law.

Munificent Donation to the Medical College at Columbus, Ohio.—Mr. Lyne Starling, of Columbus, has executed a deed of trust, conveying the sum of thirty thousand dollars, "to aid in founding and sustaining a medical college in the city of Columbus," the amount to be paid in successive instalments within the next three years. It is directed in the deed that twenty thousand

dollars be appropriated to the erection of a college edifice, and the remaining ten thousand to "sustain an infirmary or hospital, or some other benevolent institution under the supervision and control of said medical college, and in said city of Columbus."

Typhoid and Typhus Fever.—Dr. SUTTON, of Georgetown, Ky., has it in contemplation to publish a historical and practical treatise on these fevers, as they have prevailed in the interior of Kentucky. The *Western Journal* predicts that the proposed work will prove a valuable addition to our indigenous literature.—*Ibid.*

Etherization.—Dr. A. L. PEIRSON, an eminent practitioner of Salem, Mass., in an article on the use of ether in the *Boston Med. and Surg. Journal*, Jan. 19th, says, "As far as my observation goes, there is no form of pain incident to the human frame in which it is improper to use it [ether inhalation]. Its effects are very grateful in all spasmodic diseases, in colic, especially painters' colic, in inflammations, in nervous headache, in neuralgia and rheumatism, and though temporary, sometimes confer on the patient a whole night's rest."

Transactions of the New Jersey Medical Society.—At the late annual meeting of the New Jersey Medical Society, a resolution was unanimously adopted recommending the establishment of a Medical Journal in that State, as the only suitable medium for the publication of its transactions, and the proceedings of the District Societies. The history of medical organization in New Jersey is replete with interest to every physician, and by a vote of the Society authorizing its Standing Committee to make suitable extracts from its ancient records, it is contemplated to put into the hands of the profession much interesting and valuable information, in reference to the past, as well as to furnish regular reports of the proceedings of the various medical societies of our State, with a general summary of medical science.

We take pleasure in calling the attention to this publication, of which the first number has appeared under the editorial charge of Dr. Joseph Parrish, of Burlington.

FOREIGN INTELLIGENCE.

Dr. Barton's Operation for Femoral An-

chylosis.—The celebrated operation of Dr. BARTON, of Philadelphia, who, 19 months after the consolidation in a vicious direction of a fracture of the neck of the femur, divided the bone and replaced the limb in its proper position, was repeated at the Hôpital Saint Louis, in February, 1847, by Dr. Maisonneuve, and with equal success. The patient was presented to the Academy, and the following is a rapid sketch of the case:

A young man, aged nineteen, became affected with coxalgia on the right side; the joint, after some months, suppurated, and, the ligaments being destroyed, dislocation of the head of the femur occurred. In this new position ankylosis took place, the thigh being completely flexed upon the abdomen, the knee being almost as high as the corresponding shoulder. On the 23d of February, the patient having first been deprived of consciousness by inhalation of ether, an elliptic incision, seven inches in length, was performed on the outer face of the thigh; the trochanter major was thus uncovered, and, with considerable difficulty, divided with a saw. At first the limb could not return to its proper direction, but it was gradually straightened, and less than two months after the operation the patient could walk with the assistance of crutches. The limb has acquired some strength, and, although still partially insensible from the section of the sciatic nerve, is gradually regaining sensation: it is shorter by three inches than the other extremity.—*Med. Times*, Dec. 4.

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Treatment of Epilepsy.—Dr. MARSHALL HALL says that the idea of a remedy for this disease, is for the most part a superstition not more deplorable than the dependence upon an amulet. The first thing to be done is to ascertain the causes of the disease, and to avoid them; if the cause of the epileptic convulsions be gastric or enteric irritation, the stomach and bowels are to be promptly relieved. In that form of epilepsy which arises from uterine irritation, every precaution should be adopted which can allay it, such as warm fomentations to the uterine region, warm vaginal injections, &c. The next point which demands attention is the state of sphagiasmus. The head should be raised, the neck exposed, and forced inspirations excited by dashing cold water on the face. The rest of the treatment at this period of the seizure consists in free exposure to the

open air, applying cold to the head, and if there be convulsions, guarding the patient from injury.

Much depends upon the regulation of the sleep in epileptics. Every precaution should be taken to prevent the sleep from being too deep, or suddenly disturbed. The patient should retire early, and have some one quietly, but constantly, moving about the room. Such early sleep, quietly interrupted, is not so deep as that which takes place in the stiller and darker periods of the night. The object is to ward off an attack and to break the habit of periodicity.

All mental excitement must be avoided, with heated rooms, and late hours. The diet must be simple and nutritious, without stimulus; the bowels must be carefully watched and regulated, and the skin must be excited by tepid or cold sponging, followed by friction with a coarse towel.

"All these things must be done carefully and perseveringly by those who would do everything to remove the great evil. There is no royal road to health in such a case, and they who trust to a mere remedy, whether it be fetid as assafoetida, blue as indigo, or be brought from the Hague, or as far as the Indies, to the exclusion of those means which can reasonably conduce to recovery, are guilty of the danger to mind or life of the unfortunate patient."—*Prov. Medical and Surg. Jour.* Dec. 15, from *Lancet*, October 30, 1847.

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Danger attending the too early development of the mental faculties in children.—There can be no doubt that many a child has been sacrificed in early youth to the pride of parents, who, delighted with the intellectual activity of their children, have striven to make them prodigies of learning. But in these cases of early and undue employment of the brain, inflammation of the hemispherical ganglion, or of the lining membrane of the ventricles with serous effusion, has usually been the cause of either a fatal issue or of subsequent mental imbecility. The late Mr. Deville related to me an interesting case of this kind. An extremely intelligent boy, of about 12 years of age, was brought to him for phrenological examination by a parent who was very proud of the intellectual endowments of his child. Mr. Deville gave his opinion of the boy's character, at the same time cautioning the father of the dangerous course he was pur-

suing. But the father's reply was, "all that other boys considered labor and hard study are mere child's-play to him; that his studies could not be hurting him, he enjoyed them so much." Again Mr. Deville endeavored to save the child, but the father would not attend to the warning. Two years from that time the father again called on Mr. Deville, and in reply to his inquiries after his child, the father burst into tears—his child was an idiot.—*SOLLY on the Brain.*

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A new Anæsthetic Agent.—[Just after our last number went to press, we received an account of the discovery by Prof. SIMPSON of Edinburgh, of a new anæsthetic agent (chloroform). In the *American Journal of the Medical Sciences*, for last month, will be found a full account of this agent, and of the experiments which have been made with it, and which seem to show that it possesses many advantages over ether.]

At a meeting of the Medical Society of London, December 6th, Dr. Cogswell read the following interesting account of the history of chloroform, and its use as an anæsthetic agent.]

From the historical references by Dr. Pereira, in the *Pharmaceutical Journal*, lately republished in the *Medical Gazette*, it would appear that chloroform was obtained by Mr. Samuel Guthrie, of Sacket's Harbour, New York, by distilling a mixture of chloride of lime and alcohol. He supposed, however, that he had only procured chloride of olefiant gas, or chloric ether, by a new process. His communication in *Silliman's American Journal of Science and Art* for January, 1832, is entitled, a "New Mode of preparing a spirituous solution of Chloric Ether." And he proceeds to state, that he had used the product very freely during the previous six months to the point of intoxication; that he had found it singularly grateful, producing promptly a lively flow of animal spirits and consequent loquacity, and leaving little of the depression consequent on the use of ardent spirits; that it promises much as a remedy in cases requiring a safe, quick, energetic, and palatable stimulus, and that for drinking it requires an equal weight of water. Subsequently, Dr. J. Black, of Bolton, in the *Medical Gazette* of September, 1833, has an article on the same chemical product, headed "Chloric Ether; New Remedy in Spasmodic Asthma." He calls this ether a solution of chloride of carbon in alcohol; mentions it

as "brought into use by our American brethren;" considers it a most agreeable and diffusive cordial, and likely to be of service in spasmodic and adynamic states; and adds, "I have used it frequently in doses of about half a drachm, according to its strength, and from my short experience, I am disposed to think it will be of more positive benefit than any of the muriatic or sulphuric ethers." For this reference I am likewise indebted to Dr. Pereira. Following the same authority, we find that, about the same time as Mr. Guthrie, M. Soubeiran also distilled a mixture of alcohol and chloride of lime, and after a somewhat erroneous analysis, named the product bichloric ether. A division of his paper in the *Annales de Chimie et de Physique* for 1831, on the combinations of chlorine, is headed, "Action du Chlore du Chaux sur l'Alcool." Next Liebig examined the product, and finding no hydrogen, termed it chloride of carbon. Thus far its real composition remained unascertained.

In 1834 M. Dumas determined its true elementary constitution, and gave it the name of Chloroform, which, together with that of Perchloride of Formyl, since proposed by Liebig, it continues to bear almost indifferently. In 1842, Dr. Glover, of Newcastle, (a corresponding member of this Society, and author of its Fothergillian prize essay on Scrofula,) published, in the *Edinburgh Medical and Surgical Journal*, an essay on Bromine and its compounds, which had gained him the Harveian prize of Edinburgh. A chapter of this publication treats "of the physiological properties of the bromide and chloride of olefiant gas, of bromoform, chloroform, and iodoform." In a similar essay of mine some years before, on iodine and its compounds, I had remarked, that, whereas the physiological action of the metallic compounds is characterized sometimes by the predominance of one element, sometimes of the other, the sesqui-iodide of carbon as it was called (iodoform), seems to throw off all connection with the group, and by its singular action on the nervous system, allies itself to certain organic agents, such as strychnine and brucine. Struck with this result, as he has stated, Dr. Glover examined the action of the other bodies just named, using chloroform particularly, as the most characteristic, and noticed, among other effects, that the lungs become congested, and the spinal cord loses its sensibility, under the influence of this class of poisons. He suggested, how-

ever, that their properties were "not unlikely to be beneficial in the treatment of disease." There is nothing obscure or hesitating in Dr. Glover's conclusions, which were prominently put forward in the press. He used the liquid chloroform by injection into the stomach, the blood-vessels, and the peritoneal cavity.

The employment of chloroform in the form of vapour is mentioned in the *Pharmaceutical Journal* for February, 1847, where the editor, in a note to a communication "On the inhalation of the vapour of (sulphuric) ether," says, "Chloric ether has been tried in some cases with success; it is more pleasant to the taste, but appears to be rather less powerful in its effects than sulphuric ether." There is nothing in the *Journal* itself to denote that this chloric ether was chloroform, or that the experimentalist was Mr. Bell himself, but we are assured of both facts by a competent authority in the *Medical Gazette*. Subsequently M. Flourens caused an animal to respire the vapour of chloroform, so that it became unconscious of pain under a severe vivisection.

I have reason to know that Dr. Pereira has been in the frequent habit of using chloroform medicinally, both in hospital and private practice, for several years past.—*Lancet*, Dec. 11.

Physiological Action of Chloroform.—The physiological action of chloroform inhalation, as shown by the experiments of a committee of the Medico-Chirurgical Society of Edinburgh, is "precisely similar to that of ether,—producing loss, 1st, of the cerebral functions; 2d, of the spinal functions; and 3dly, of those of the medulla oblongata. The advantages of chloroform over ether are:—1st, the smaller quantity required; 2d, its more rapid and more persistent action; 3d, its having more agreeable odour and not irritating the larynx; and 4th, its greater facility of application."

Chloroform.—M. Gerdy communicated to the French Academy of Science, the results of his experiments on the new anæsthetic agent. M. Gerdy was of opinion that the inhalation of this substance should be performed with an instrument, because the contact of chloroform with the skin and lips often produced excoriations. In his experiments, as in those of Professor Simpson, unconsciousness was obtained more rapidly

than by the use of ether. M. Amussat had also arrived at the same conclusion; but he had further remarked, in animals and in man, that chloroform, like ether, caused the arterial blood to assume a dark color, and to resemble closely venous blood. M. Charrière presented to the academy for its approbation an inhaler which he had constructed for the exhibition of chloroform.

Professor Roux stated that he had now employed this anæsthetic agent in several instances, and that it produced loss of consciousness more rapidly, but for a shorter time, than ether: he preferred M. Charrière's apparatus to any other. Professor Velpeau was of a different opinion: he believed the insensibility to be more prolonged after inhalation of chloroform, than after ether. The handkerchief was the best inhaler. M. Gruby said that arterial blood was not changed in colour by chloroform, whereas it grew dark by etherization; and also that animals who died after inhalation of chloroform could still serve as nutriment—an advantage not presented by the flesh of those killed by ether.

Ether and Chloroform.—[The *Lancet* of 1st of January contains a record of one hundred experiments on animals with ether and chloroform, performed by THOMAS WAKLEY, Esq., surgeon to the Royal Free Hospital. Our limits do not permit us to give the details of these experiments, but the general results may be gathered from the following concluding observations.]

"The results of the above experiments warrant, I think, an important practical application. On some points, at least, no room remains for doubt. An examination of two or three facts irresistibly impels the mind to this conclusion. Only four days previously to the death of that celebrated surgeon, whose loss is truly a national calamity, the sufferer himself, while labouring under a paroxysm of dyspnoea, thought that he might possibly find relief from the inhalation of the vapour of chloroform. The suggestion was adopted; the vapour was administered, but necessarily without any beneficial result. Why necessarily! Because the post-mortem examination exhibited lungs that were 'engorged throughout,' and an 'aneurismal sac' near to the heart. Under such circumstances of disease, and in such a condition of the lungs, a more unfortunate or dangerous remedial agent than the chloroform could

not have been employed. This is now incontestably proved by the dissections in the instances in which death followed the experiments which I have just recorded. The examinations prove that blood, almost black, had collected in the heart and lungs, and the great vessels connected with those organs, to a degree of intensity which was probably never surpassed. Anything of the kind more striking probably was never witnessed in post-mortem examinations. What, then, is the practical application of the facts which are thus brought under our consideration? Why, obviously and necessarily, that when there exists any disease of the heart, any aneurism near to the heart, any threatening dyspnoea, or any tendency to an 'engorgement of the lungs,' it would be highly imprudent to recommend the inhalation of the vapour of chloroform or of ether; but that in any of the abnormal conditions here described, should the practitioner determine upon employing one of the two agents in question, assuredly the more dangerous one of the two would be found in the vapour of chloroform."

Extraordinary Application of Chloroform.—The value of chloroform is now fully established as an anæsthetic agent. We have recorded in our own columns many extraordinary applications of it in some remarkable cases, but none so remarkable as that to which, with considerable presence of mind, and with the most complete success, it was applied by Mr. Cox, chemist, Trumpington-street, in the following circumstances:—On Sunday night, as Mr. Garner, veterinary surgeon, of St. Ives, was returning through Cambridge, with his horse and gig, from a visit to his brother at Hauxston, he had occasion to alter the harness, for which purpose he stopped at the "Little Rose." He had scarcely got out of the gig when the horse began to kick in a most terrific manner, to the eminent danger of a lady who remained in the gig, as well as that of Mr. Garner himself, who was holding him by the head, and a crowd of persons who had collected; but such was the fury of the animal that no one could render any assistance. At last the brute threw himself fairly down, Mr. Garner still holding him by the head; and affairs were in this desperate state when Mr. Cox, chemist (next door), apprehensive of the danger that might ensue, poured about a drachm of chloroform on his handkerchief

and applied it to the animal's mouth and nostrils. The furious patient readily inhaled it, and in one minute became quite insensible and to all appearance dead. This allowed the gig and harness to be removed with perfect security, and in about five minutes the effect of the chloroform passed off, the horse got up, shook himself, and walked quietly into the stable. Such is the effect of chloroform even upon the horse.—*Med. Times*, Dec. 25, 1847, from *Cambridgeshire Advertiser*.

Rape under the influence of Ether.—A dentist in France has been lately brought to trial before the Court of Assizes of the Seine, on the charge of having committed criminal assaults on two young women, named Hyacinthe and Henriette, whilst they were in a state of insensibility, caused by the inhalation of the vapour of ether. From the nature of the details which had to be entered into, the trial took place with closed doors; but it transpired that the young women, who had gone to the house of the prisoner for the purpose of having teeth drawn, had been persuaded by him to inhale the vapour of ether, on the ground that it would prevent them from suffering pain; and when he had thrown them into a somnolent state, which, however, they said, did not prevent them from knowing what passed, he committed the criminal assaults complained of. One of the girls declared, that though at the time she knew well what was passing around her, she was totally unable to offer any resistance; and that at the moment the offence was committed, she became unconscious, and remained so for some time. The prisoner's advocate said that the prisoner totally denied that he was guilty; and the learned gentleman argued that the effects produced by the inhalation of ether on the imagination were such that it was very probable that the girls might have taken their own hallucinations for facts. It, however, appeared that one of the girls, on her return home, had her dress disordered, her hair dishevelled, and was greatly agitated. The jury declared the prisoner guilty, and the Court condemned him to six years' hard labour at the hulks, but without exposure on the pillory. It was also ordered the *syndics* of the prisoner's bankruptcy, his arrest having led to a bankruptcy, should pay one of the girls, who is under age, a sum of 1,500*fr.* as damages.—*Lond. Med. Gaz.*, Nov. 1847.

Influenza.—In our preceding number, (page 5,) we noticed the extensive prevalence of this disease in Great Britain; it has equally prevailed over the whole of Europe. Ten thousand persons are said to be laid up with the influenza at Lille, but no case has terminated fatally. At Toulouse there are, it is said, fifteen thousand persons in a population of fifty-five thousand suffering from that malady.

Letters from Marseilles state that out of a population of 160,000 souls, half at least are confined to bed by the influenza. Within the last few days, however, it has lost much of its intensity at Marseilles, but it is raging with violence at Perpignan, Montpellier, and Nismes. At Toulouse, by the last accounts, no less than 15,000 persons are labouring under the distemper. It is also very prevalent in Paris, where it has recalled the recollection of similar events before the arrival of the cholera in 1832.

Letters from Copenhagen state that influenza is generally prevalent in that city, and that nearly all the performers at the theatre were laid up with it.

The Cholera in Russia.—According to official documents from St. Petersburg, of the 2d, the cholera was sensibly on the decline in Russia. From the appearance of the disease up to the 22d of November, the total number of persons attacked at Moscow was 2360, of whom 1097 died. In the districts of the government of Moscow 141 individuals fell ill, of whom 59 died. At Kiev, from the 9th to the 16th of November, there were 179 cases and 129 deaths. In the province of Kiev, up to the 13th of November, 93 persons died out of 139 attacked. With the cold season, and the extension of the malady towards the west, the disease had lost a great deal of its energy. It was, in fact, declining everywhere, except in the governments of Pultowa and Tchernigoff, where it appeared to increase. The places newly invaded by the cholera are Mohleff, on the Dnieper; Kherson, on the Black Sea; Vologda and Tver, on the road from Moscow and St. Petersburg; but in those places it is of a mild character. According to the latest intelligence from Constantinople, the cholera was stationary. Not more than one or two cases occurred daily, and they seldom proved fatal.—*Medical Gazette.*

More recent information states that cholera

has broken out at Mosul, a city on the Tigris, in Asiatic Turkey.—*Lancet*, Jan. 1.

A new Epizootic—the Small-pox in Sheep.—A very fatal disease, and, it is believed, new to Great Britain, has lately made its appearance among sheep. It is the small-pox of that animal, and in its first stages more particularly, many fall victims to it. It is desirable that the public should be apprised of it, in order that the necessary precautionary measures may be adopted to prevent its further propagation. It was introduced by some Spanish sheep imported from Hamburg, and has already found its way into many flocks. Several sheep affected with it have also been exposed for sale in Smithfield market. At the Royal Veterinary College, experiments have been instituted, by which its infectious and contagious nature has been completely proved, and others are being carried on with a view to check its progress and to lessen its fatality.—*Times.*

University College.—Prof. JAMES SYME, Regius Professor of Clinical Surgery in the University of Edinburgh, has been appointed by the council to the chair of clinical surgery, in University College, London, vacant by the decease of the late Mr. Liston.

Pension to the Widow of Dieffenbach.—The King of Prussia has settled an annuity of 3000 dollars upon the widow of Dieffenbach.

Legacy to University College, London.—The late Dr. HOLME, of Manchester, has left a legacy of upwards of 120,000 dollars to the medical department of this institution.

Obituary Record.—Died, in London, Dec. 7th, in the 53d year of his age, ROBERT LISTON, Esq., well known as one of the most eminent surgeons of our day. His disease was aneurism of the aorta at the origin of the innominata.

—, recently, aged 72, the celebrated BURDACH, author of a well known work on Physiology, and Professor in the University of Königsberg.

—, at Nice, Oct. 9th, Dr. MIGUEL, the first editor of the "Bulletin de Thérapeutique."

—, in London, Dec. 5th, WILLIAM DALRYMPLE, late surgeon to the Norfolk and Norwich Hospital, in the 75th year of his age.